Departme					3720 so that	appı	ropriate act	ion car	This form provides info to be taken if default is runder the Privacy Act, in	ot cured. R	espons	es may be disc	losed outside VA	
NOTICE		. I	of records, 5	only if the disclosure is authorized under the Privacy Act, including the routine uses i of records, 55VA26, Loan Guaranty Home, Condominium and Manufactured Hom										
(Chapter 3	7, 11tle 30 TYPE	VA L	OAN	NUME	BER (NOTE: Lo	an			cords -VA, published in t				37A I NI- !!	
NOTICE	INSTRUCTIONS: Please type or print. Note the special instructions for "VA Loan No." and Items 1-4 and 7, as these entries will be used for VA coding purposes. For 38 CFR 36.4600 Loans, code a "4" in the block titled "TYPE."													
						но				k uneu 111	E.			
HOLDER'S NOTICE  To (Complete Regional Office/Center Address)  HOLDER'S NAME, ADDRESS AND TELEPHONE NO. PURPOSE OF LOAN (Check One)														
DEPARTMENT OF VETERANS AFFAIRS  LOAN GUARANTY DIVISION    HOME (1)												HOME (1)		
						NO.(Complete only if different from holder shown above)  MANUFACT HOME (8)  SERVICER COI (6 Digits)						ICER CODE		
												(0 Dig	113)	
DESCRIPTION OF DELINQUENT														
NOTE: Enter number	er only	1. SER	RVICE	ER LOA	AN NO.	2. DATE OF FIRST UNCURED DEFAULT  3A. SOCIAL SECURITY NO. (Present Owner)								
without spaces, dash DO NOT ENTER M THAN 14 CHARAC	IORE					EXAMPLE: Enter 05 01 93 for   MONTH DAY YEAR   MONTH DAY 1, 1993								
Enter last name, Comma, first name 3B. NAME OF PRESENT OWNER NOTE 5. COUNTY OR PARISH (Property located Comma, First name)											roperty location)			
and middle initial  4. ADDRESS OF PRESENT OWNER  A. NUMBER AND STREET OR RURAL ROUTE Item 3B: Do not enter more than 25 characters in this ltem 4)											f different than			
(Entries in Items A and B MUST be limited to 25 characters)		Y AND	STA	ATE				area C. ZII COD	P >					
7. DATE O	F FIRST PA	AYMFN	NT	3	8. ORIGINAL V	ETE	RAN'S NA	ME A	ND PRESENT 3B and 4 above)	9. AN	1OUN1	Γ OF EACH IN	ISTALLMENT	
	an instrum				ADDRESS (I	ii uiii	iereni inar	rnems	S 3D and 4 above)	PRINCIPA INTERES			\$	
EXAMPLE: Enter	MONTI	H DA'	Y	/EAR						TAX AND	INSU	IRANCE		
06 01 93 for June 1, 1993	<b>&gt;</b>									OTHER		TOTAL	•	
10. OTHER DEFAUL				e, taxes	11.		PRINCIPAL \$			TOTAL   \$  12. INTEREST RATE AND OUTSTANDING LOAN BALANCE				
insurance, special assessments, etc.)  AMOUNT  OF						TAX	INTEREST AND INSURA	TEREST A. INTEREST D INSURANCE RATE				B. DATE	C. AMOUNT	
					DEFAULT		TOT		\$					
		1		14 DA			ER'S LOA	ı .			1			
13. CONTACT(S) WITH FACE TO FACE  TYPE NUMBER 14. DATES OF P INSPECTION							1 1	15. C	ONDITION OF PROP	ERTY	OF VE		OPERTY OCCUPIED BY ORIGINAL TENANT OFFICERAN	
MORTGAGOR TEL	EPHONE											TRANSFEREE	VACANT	
17.	A. MONTH INCOM			ONTHL' GATION			R'S ATTITU DEFAULT	JDE	D. PLACE OF EN	D. PLACE OF EMPLOYMENT			F. HOME TELEPHONE NUMBER	
BORROWER														
SPOUSE														
18. IS FORBEARANCE	E WARRANT	TED?	19	9. REA	SON FOR DEF	AUL	_T						•	
20. SUMMARY OF LOAN SERVICING (Must give complete details to support conclusion that forbearance is or is not warranted. Include repayment schedules or other arrangements, etc.)														
ropaymont conex		ior arre	ango.	morno,	0.0.7									
21. NAME AND TITLE	OF AUTHO	RIZED (	OFFIC	CIAL (Tv	pe or Print)				22. SIGNATURE OF	AUTHORIZ	ED OF	FICIAL		
				(-)		] SE	OLDER RVICING SENT							
RESPONDENT BURDEN: VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. Public reporting for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-800-827-1000 for mailing information on where to send your														
VA FORM <b>26-6</b> JUL 1996				E	XISTING STOCK VILL BE USED.								OPY 1	

Department of Veterans Affairs					PRIVACY ACT INFORMATION: This form provides information which is required by 38 U.S.C 3720 so that appropriate action can be taken if default is not cured. Responses may be disclosed							losed outside VA				
NOTICE	T	only if the disclosure is authorized under the Privacy Act, including the routine uses identified in the V of records, 55VA26, Loan Guaranty Home, Condominium and Manufactured Home Loan Applicant														
(Chapter 3	<i>7, Title 3</i>  TYPE	8, U.S	S.C.)	NUMBE	and Parapleg	ic Gra			cords -VA, publ							
NOTICE	TYPE VA LOAN NUMBER (NOTE: Loan number must be numeric, 12 digits)  INSTRUCTIONS:Please type or print. Note the special instructions for "VA Loan No." and Items 1-4 and 7, as these entries will be used for VA coding purposes. For 38 CFR 36.4600 Loans, code a "4" in the block titled "TYPE."															
						ЦΩ				the block	titled "TYF	'E."				
To (Complete Regional Office/Center Address)  HOLDER'S NOTICE  HOLDER'S NAME, ADDRESS AND TELEPHONE NO. PURPOSE OF LOAN (Check One)																
DEPARTMENT ( LOAN GUARAN	AFFAIF	RS		_	SERVICING AGENT'S NAME, ADDRESS AND TELEPHONE NO.(Complete only if different from holder shown above)  (Check One) HOME (1) HOME CONDO (1) HOME REFIN. (5) MANUFACTURED HOME (8) SERVICER CODE											
(6 Digits)											115)					
DESCRIPTION OF DELINQUENT																
NOTE: Enter number	er only	1. SEI	RVICE	R LOAN	NO.		2. DATE OF FIRST UNCURED DEFAULT  3A. SOCIAL SECURITY NO. (Present Owner)									
without spaces, dashes, etc. DO NOT ENTER MORE THAN 14 CHARACTERS						EXAMPLE: Enter 05 01 93 for May 1, 1993 MONTH DAY Y						YEAR	-			
Enter last name, Comma, first name and middle initial	➤ 3B. N	AME C	OF PRE	ESENT (	OWNER				NOTE		5. COUN	NTY OI	R PARISH <i>(Pi</i>	operty location)		
4. ADDRESS OF PRESENT OWNER A. NUMBER AND STREET OR RURAL ROUTE that										Do not enter more characters in this  6. PROPERTY ADDRESS (If different than Item 4)						
and B MUST be limited to 25 characters)		TY ANI	D STA	TE				C. ZII COD	P►							
7. DATE O	F FIRST P	AYME	NT	8.	ORIGINAL V	ETEI	RAN'S N	AME A	ND PRESEN 3B and 4 abo	T	1		OF EACH IN	STALLMENT		
	an instrum				ADDRESS (I	ii uiii	ereni ina	ii ileiiis	S SD and 4 abo	Jve)	PRINCIPA INTERES			\$		
EXAMPLE: Enter	MONT	H DA	Y Y	EAR							TAX AND	DINSU	RANCE			
06 01 93 for June 1, 1993											OTHER		TOTAL	\$		
10. OTHER DEFAULT (Specify, real estate, taxes, insurance, special assessments, etc.)							PRINCIPAL \$				12. INTEREST RATE AND OUTSTANDING LOAN BALANCE					
					AMOUNT OF DEFAULT		INTEREST	A. INTEREST B. D.				B. DATE	C. AMOUNT			
							TO		\$ RVICING							
	TYPE	NUN	/BER	14. DATI	ES OF PROF			т .	ONDITION O	F PROPE	RTY	16 F	PROPERTY O	CCUPIED BY		
CONTACT(3)	TER/WIRE		MDER	INSP	PECTIONS			10.0	ONDITION	i i itoi Ei			ORIGINAL VETERAN	TENANT		
MORTGAGOR ———	LEPHONE												TRANSFEREE	☐ VACANT		
17.	A. MONT INCOM			ONTHLY SATIONS	C. BORRO		R'S ATTIT DEFAULT		D. PLA	D. PLACE OF EMPLOYMENT			E. WORK TELEPHONE NUMBER	F. HOME TELEPHONE NUMBER		
BORROWER																
SPOUSE																
18. IS FORBEARANCE	E WARRAN	TED?	19	). REASC	ON FOR DEF	AUL	T									
20. SUMMARY OF repayment scheo						ails to	o support	conclu	ısion that forb	earance is	or is not	warran	ted. Include			
repayment denot	dures or on	nor un	angom	iomo, oto	,											
21. NAME AND TITLE OF AUTHORIZED OFFICIAL (Type or Print) 22. SIGNATURE OF AUTHORIZED OFFICIAL																
						] SEF	LDER RVICING ENT									
RESPONDENT BURDEN: VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. Public reporting for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-800-827-1000 for mailing information on where to send your																
VA FORM <b>26-6</b> JUL 1996	850				STING STOCK L BE USED.	KS OF	VA FOR	M 26-68	50, APR 1994,				SERVICE	R'S COPY 2		